

REPORT OF DESIGNATED EXAMINER

I, the undersigned designated examiner, hereby certify that I am an authorized examiner designated by the Division of Substance Abuse and Mental Health in accordance with Utah Code Annotated 62A-15-602(3), and that on the _____ day of _____, 20_____, did examine _____, at _____.

Prior to examination, I informed the proposed patient that, if not represented by legal counsel, he/she did not have to say anything, the nature and reasons for the examination, that it was ordered by the court, that any information volunteered could form part of the basis for his or her involuntary commitment, and that findings resulting from the examination will be made available to the court.

I hereby report to the court my findings as to the mental condition of the proposed patient and for his/her need for custody, care, and treatment by a local mental health authority and based upon such examination as follows: _____

In conclusion, I find:

Initial Hearing

OR _____ The proposed patient is not mentally ill.
_____ The proposed patient has a mental illness but does not require involuntary commitment for the following reason(s): _____

OR _____ The proposed patient has a mental illness;
_____ because of the proposed mental illness he poses a substantial danger of physical injury to others or himself, which may include the inability to weigh the basic necessities of life such as food, clothing, and shelter, if allowed to remain at liberty;
_____ the patient lacks the ability to engage in a rational decision-making process regarding the acceptance of mental treatment as demonstrated by evidence of inability to weigh the possible risks of accepting or rejecting treatment;
_____ there is no appropriate less-restrictive alternative to a court order of commitment;
and
_____ the local mental health authority can provide the individual with treatment that is adequate and appropriate to his conditions and needs.

Comments: _____

Review Hearing

OR _____ The said patient is not mentally ill;
_____ The said patient has a mental illness but does not require continued
commitment
for the following reason(s): _____

OR _____ the patient is still mentally ill; and
_____ absent an order of involuntary commitment and without continued treatment he
will
suffer severe and abnormal mental and emotional distress as indicated by recent
past history and will experience deterioration in his ability to function in the least
restrictive environment, thereby making him a substantial danger to himself or
others.

Comments: _____

Other Pertinent Information:

History of present illness: _____

Past and current treatment (if any): _____

Orientation: _____
Person _____
Place _____
Time _____

Memory: _____ Recent _____
Remote _____

Attitude: _____ Mood _____

Hallucinations, if any: _____

Diagnosis: _____

Recommendation: _____

Dated this _____ day of _____, 20_____.

Designated Examiner Signature

**IN THE FOURTH JUDICIAL DISTRICT COURT
UTAH COUNTY, STATE OF UTAH**

IN THE MATTER OF:

**REPORT OF EXAMINATION BY
DESIGNATED EXAMINER**

CASE NO.

I, _____, certify that on or before _____,
I did examine _____ for the purpose of reporting to the
Court my opinion as to the mental condition of _____ and other
known facts relating to the criteria for involuntary commitment. Based on examination I
report my findings to the court as attached.

DATED this _____ day of _____, 20_____.

Designated Examiner